

DEPARTMENT OF  
PUBLIC HEALTH AND HUMAN SERVICES



BRIAN SCHWEITZER  
GOVERNOR

JOAN MILES  
DIRECTOR

STATE OF MONTANA

brjohnson@mt.gov

DEVELOPMENTAL DISABILITIES PROGRAM  
300 N WILLSON STE 3001  
BOZEMAN MT 59715-3752  
406-587-6066 – VOICE  
406-586-8924 – FAX

June 30, 2008

Catherine Murphy, Regional Manager  
DPHHS/DDP/Region IV  
3075 N Montana Ave  
Helena MT 59620

Dear Ms. Murphy,

Following is the report for FY '08 of a review that was completed for state case management in Region IV. The review took place in May of 2008. There were no findings and no QAO sheets issued. It was a pleasure to work with Ms. Amundson and her staff in the completion of this review. The individual worksheets for the review have been given to the Case Management Supervisor.

Sincerely,

*Brad Johnson, M.S.*

Brad Johnson, Quality Improvement Specialist  
Review Coordinator

cc: Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance, DDP  
Marie Amundson, Case Mgt. Supervisor, DDP  
Perry Jones, Waiver Specialist, DDP  
DDP Files, Attn. Laura Hartman

Developmental Disabilities Program Case Management  
QUALITY ASSURANCE REVIEW  
Region IV – FY '08

### **Scope of the Review**

This is a summary of the quality assurance review of case management services provided by Developmental Disabilities Program Case Management (hereinafter referred to as DDPCM) for Fiscal Year '08. Two files from each case manager were reviewed: one file was a client receiving services and the other file was a client only receiving case management services. The July 1, 2007 standards were used for this review. The surveyor was Quality Improvement Specialist Cathy Murphy with the State of Montana Developmental Disabilities Program. The on-site reviews were conducted in May, 2008.

DDPCM provides case management services in Helena Montana.

### **Files of individuals in active services:**

- **Client Survey** – All files reviewed had a completed client survey.
- **Waiver 5 Form** – All files had a completed waiver 5 form. A copy of the Waiver 5 is forwarded to the respective QIS.
- **Annual IP/PSP** – All files had an annual IP / PSP. (PSPs were not implemented until 7/1/08, all plans reviewed were Individual Plans). There was no evidence that IP/PSPs were reviewed by the Case Management supervisor. The surveyor consulted with Central Office staff and a reference for this requirement could not be cited. Thus, a QAO sheet was not written. However, this should be considered to be “best practice” and implemented.
- **Quarterly Reports Reviewed** – All files had evidence that quarterly reports were being reviewed and followed up on when needed.
- **IP/PSP Revised as needed** – There is ample evidence present in the files that plans are revised when necessary.
- **Services Delivered According to IP/PSP** - There is significant evidence that case managers are monitoring individual plans and following up with service providers when needed.
- **Services Coordinated** – There is ample evidence in case notes and other documentation that the various client services are being coordinated by the case manager.
- **Abuse, Neglect & Exploitation Protocols followed** – Evidence of compliance is apparent in the review of incident reports in files.
- **Provides Information on Abuse Reporting** – There was little or no evidence that this occurs. Some information may be provided when the client survey is completed but it is not documented. This was not a well-defined expectation for case managers.
- **Provides Technical Assistance for Waiver Services** – Case notes provide documentation of case managers talking with families about wavier services and

reviewing the Waiver 5 form with them. It is not clear if they get a listing of waiver services and their descriptions. This has not been a well-defined expectation of case managers.

- **Face-to-face contacts** – All files met the standard of 6 face-to-face contacts per year. There was ample evidence of significant amounts of direct and indirect contacts on behalf of the consumers surveyed.

**Files of individuals receiving case management services only:**

- **Completed, current Individual Service Plan** – All files met this requirement.
- **Referrals Up-To-Date** – All consumers that needed a referral met this requirement.
- **Additional, Available Resources Being Accessed** – DDPCM meets and usually exceeds this requirement. Significant evidence of services coordination outside of DD services.
- **Provides Training in Abuse Reporting** – See above, same requirement.
- **Face-to-Face Contacts** – All files reviewed met this requirement.

**Summary**

Developmental Disabilities Program Case Management continues to provide great services to its consumers. Given the challenges of this changing environment, it was great to see standards of quality being upheld. There were no QAO sheets written and no corrective actions needed as a result of this review.

***Brad Johnson, M.S.***

Brad Johnson, Quality Improvement Specialist

Review Coordinator

10/8/08